



State of New Jersey

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Guidelines for the use of Nerve Agent Antidote Kits MARK-1 Kits by Emergency Medical Services Providers

The New Jersey Department of Health and Senior Services (DHSS) has recently reviewed Health Department policies regarding the State's domestic preparedness and security efforts. The Department maintains an all hazard preparedness approach for training and education for incidents of mass casualty and/or chemical, biological, radiological, nuclear or explosive (CBRNE) event. The Office of Emergency Medical Services has developed guidelines for use of nerve agent antidote kits (NAAK) or the MARK-1 kit by the emergency medical services provider. These guidelines apply to EMS First Responders, Emergency Medical Technician-Basics and Emergency Medical Technician-Paramedics.

The guidelines for the MARK-1 contain an educational component, treatment protocol and an accountability system for the agency. Most importantly, the MARK-1 kit is intended for *self-preservation* only if an EMS worker is exposed to a chemical event. The guidelines do not apply for the administration of MARK-1 to patients with the signs and symptoms of a chemical exposure. The MARK-1 kits are solely intended as a force-protection measure and are to be used by the EMS providers. The MARK-1 should not be used as a prophylactic measure or as a shield to attempt a rescue. Entrance into the hot zone of a hazardous materials incident should be performed by trained personnel only.

The MARK-1 kits contain two cartridges of medicals; 2 milligrams of atropine and 600 milligrams of pralidoxime chloride (2pam). Please see the attached drug information fact sheets for indications, contraindications and side effects. The Department recommends that three MARK-1 kits be distributed to each responder.

EMS Agencies that wish to carry MARK-1 kits are required to have the services of a medical director. Agencies are required to register with the Office of Emergency Medical Services (OEMS). Registration shall include the name of the organization, address, contact person, contact phone number, medical director's name and an e-mail address for an officer of the organization. OEMS will utilize the e-mail address and/or contact phone number of the organization to share intelligence and planning activities regarding EMS.

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The Department of Health and Senior Services already has a stock pile of MARK-1 kits that are deployable for EMS use during CBRNE events. The MARK-1 kits that are registered with the Department by BLS and ALS agencies will be used as part of the state's Strategic State Stockpile plan. The Strategic State Stockpile is maintained by the New Jersey Department of Health and Senior Services and available to help provide needed medications and antidotes to any area in New Jersey.

It is the recommendation by the Department that the distribution and collection procedures for the kits will be left to the discretion of the specific agency. MARK-1 kits are permitted to be distributed to crew members during times of an elevated threat level of orange or red under the Department of Homeland Security Threat Advisor.

Should a kit be lost, stolen, damaged, or used, notification must be made to the Department of Health and Senior Services, Office of Emergency Medical Services. In the event that a MARK-1 is used, either intentionally or accidentally, notification must be made to the Department accompanied by the name of the victim, the circumstances surrounding the incident and whether any medical attention was required. The agency must verbally report the incident by the next business day and in writing within ten business days.

All agencies must maintain training records reflecting that the pre-hospital providers using the Mark-1 kits have been trained following the objectives set forth by the Department of Health and Senior Services. Agencies and members wishing to utilize the Mark-1 kits will need to attend a training program covering the specific objectives. At the end of the program, participants must be able to:

1. Identify the signs and symptoms of patients exposed to chemical agents;
2. Determine the process for NAAK administration, including who administers, who receives and the process in doing such;
3. Identify the signs and symptoms seen to determine whether the NAAK was given correctly and whether subsequent NAAKs are needed;
4. Understand that NAAKs must not be given as a prophylactic measure prior to entering a hazardous scene involving chemical agents;
5. Identify what agency has regulatory oversight of the kits. The participant must also understand the procedures for registering with the NJ Department of Health and Senior Services, Office of Emergency Medical Services and the importance of doing so;
6. Identify the procedure taken in order to obtain additional NAAKs; and

7. Identify the effects and other drug specific information for the Nerve Agent Antidote Kits.

Summary:

1. The MARK-1 kit may be used by an EMS first responders, Emergency Medical Technician – Basic (EMT-B) and Emergency Medical Technician – Paramedics certified through the New Jersey Department of Health and Senior Services, or recognized and functioning with a New Jersey EMS agency;
2. The Mark-1 kit may not be used on civilian and/or other victims;
3. The MARK-1 kit will be issued only in deployment to credible threats and/or actual nerve agent use. The kits will be issued and carried during a period of orange or red threat level.
4. The determination of an actual event or “credible threat” will be made by the Commissioner of Health and Senior Services or their designee.
5. The MARK-1 kits will be issued to the EMS individual only for their tour of duty. At the conclusion of the shift, the kits are to be turned in to the appropriate EMS representative or secured under lock and key if they are not going to be re-deployed.
6. No EMS personnel will take possession of any MARK-1 without proper authorization of agency management. The kits should never be removed from the agency nor shall they be acquired for personal use outside of the agency;
7. EMS personnel are responsible to maintain possession and integrity of the issued kits;
8. The MARK-1 kits are for on-duty staff acting in an official EMS capacity;
9. All EMS personnel shall complete training on self injecting devices prior to them being issued the MARK-1;
10. All EMS personnel that are supplied with MARK-1 kit during their tour of duty will be given a refresher in-service prior to issuance;
11. The issuing agency will maintain these kits and up to date training records. The kits shall remain securely sealed and verification of medication must be completed every shift.

12. The Department of Health and Senior Services retains the right to audit training and maintenance records of the MARK-1 kits as deemed necessary by OEMS staff.